

# UNDERGROUND STORAGE TANK REMOVAL REPORT

---

## CARQUINEZ BRIDGE MAINTENANCE STATION SOLANO COUNTY, CALIFORNIA



**GEOCON**

GEOTECHNICAL  
&  
ENVIRONMENTAL  
CONSULTANTS

PREPARED FOR

CALIFORNIA DEPARTMENT OF TRANSPORTATION  
DISTRICT 4  
OAKLAND, CALIFORNIA

TASK ORDER NO. 04-43A0006-75  
GEOCON PROJECT NO. S8190-06-11

MARCH 1999



Project No. S8190-06-11  
March 29, 1999

California Department of Transportation  
District 4 - Maintenance  
Post Office Box 23660  
Oakland, California 94623-0660

Attention: Mr. Manual Miranda

Subject: CARQUINEZ BRIDGE MAINTENANCE STATION  
NORTHERN TERMINUS OF CARQUINEZ BRIDGE-INTERSTATE 80  
SOLANO COUNTY, CALIFORNIA  
CONTRACT NO. 43A0006  
TASK ORDER NO. 04-43A0006-75  
UNDERGROUND STORAGE TANK REMOVAL REPORT

Dear Mr. Miranda:

In accordance with Caltrans Contract No. 43A0006 and Task Order No. 04-43A0006-75, Geocon Environmental Consultants, Inc. (Geocon) has performed underground storage tank (UST) removal services at the above-referenced project site. This report summarizes the services performed including the removal of one 50-gallon gasoline UST.


If there are any questions concerning the contents of this report, or if Geocon may be of further service, please contact the undersigned at your convenience.

Very truly yours,

GEOCON ENVIRONMENTAL CONSULTANTS, INC.

  
John E. Juhrend, PE, DEC  
Project Manager



  
Scott T. Waite  
Senior Staff Engineer

STW:JEJ:dw

- (2) Addressee
- (1) California Department of Transportation  
Attn: Mr. Carlos Lopez
- (1) Solano County Department of Environmental Management  
Attn: Mr. Mike Rees

## TABLE OF CONTENTS

1.0 INTRODUCTION .....	1
1.1 Site Location and Existing Improvements .....	1
2.0 SCOPE OF SERVICES .....	2
2.1 Pre-Field Activities .....	2
2.2 UST Removal Activities .....	2
3.0 UST REMOVAL OPERATIONS .....	3
4.0 ANALYTICAL RESULTS .....	5
5.0 SUMMARY OF FINDINGS .....	6

Figure 1, Vicinity Map

Figure 2, Site Plan

Figure 3, UST Removal Soil Sample Locations

Table 1 - Summary of UST Removal Soil Analytical Data

Appendix A - Regulatory Permits and Correspondence

Appendix B - Rinseate, Tank, and Soil Disposal Documentation

Appendix C - Laboratory Reports and Chain-of-Custody Documentation

# UNDERGROUND STORAGE TANK REMOVAL REPORT

## 1.0 INTRODUCTION

This report presents the results of the removal of one 50-gallon steel gasoline UST performed by Geocon Environmental Consultants, Inc. (Geocon) under Caltrans Contract No. 43A0006 and Task Order (TO) No. 04-43A0006-75.

### 1.1 Site Location and Existing Improvements

The project site consists of the Caltrans Carquinez Bridge Maintenance Station located at the northern terminus of the Carquinez Bridge adjacent to westbound Interstate 80 (I-80), Vallejo, California. The approximate site location is depicted on the attached Vicinity Map, Figure 1.

The Carquinez Bridge facility is used by Caltrans to store and service bridge painting equipment and road and highway maintenance vehicles. The 50-gallon gasoline UST was formerly utilized by Caltrans for fueling a generator used to power two air compressors for bridge painting activities. Geocon has recently completed the installation of a new 120-gallon Hoover aboveground storage tank (AST) at the site. The locations of the former fuel UST and new replacement AST are depicted on the attached Site Plan, Figure 2.

## 2.0 SCOPE OF SERVICES

Outlined below is a summary of the scope of services performed by Geocon pursuant to Task Order No. 04-43A0006-75.

### 2.1 Pre-Field Activities

- A pre-work site meeting was conducted on November 20, 1998 with representatives of Caltrans and Geocon to review the Task Order and project work areas.
- Obtained a UST removal permit dated December 2, 1998 from the Solano County Department of Environmental Management (SCDEM). A copy of the SCDEM permit is presented in Appendix A.
- Prepared a *Health and Safety Plan* dated December 14, 1998 to provide guidelines on the use of personal protective equipment, monitoring equipment, and the health and safety procedures to be implemented during the tank removal activities.
- Prepared a *Workplan* dated December 15, 1998 to outline the requested scope of services and UST removal, soil sampling and analytical testing protocols.
- Provided written notification to the Bay Area Air Quality Management District (BAAQMD) prior to tank removal activities at the site. A copy of the BAAQMD notification response is presented in Appendix A.
- Notified the Vallejo Fire Department (VFD) three days prior to the UST excavation.
- Contacted Underground Service Alert on December 1, 1998 (USA Ticket No. 318339) to advise local subscribing utility companies of the proposed site excavation work.

### 2.2 UST Removal Activities

- Removed one 50-gallon gasoline UST, vent and product piping on December 16, 1998 in accordance with SCDEM permit requirements.
- Performed soil sampling and analysis in accordance with SCDEM requirements.
- Performed UST excavation backfill and soil compaction.

### 3.0 UST REMOVAL OPERATIONS

The tank removal activities commenced with the removal of residual gasoline product from the steel UST with the use of a pneumatic double diaphragm vacuum pump. The gasoline product was placed in a 55-gallon drum for subsequent disposal. The tanks were further rinsed prior to asphalt concrete demolition and excavation. The rinseate was placed in a 55-gallon drum for subsequent disposal. Approximately 40-gallons of residual product and rinseate water was transported under bill of lading No. 2759 to the Alviso Oil facility located in Alviso, California on January 5, 1999. A copy of the bill of lading is presented in Appendix B.

The asphalt concrete and backfill materials overlying the UST steel product pipeline, venting and fill pipes were removed on December 16, 1998. Soil generated during the tank excavation activities was stockpiled onsite.

After the gasoline UST was triple rinsed it was purged of remaining flammable vapors using 20 pounds of dry ice before removal. After achieving a lower explosive limit (LEL) of 2% and oxygen level of 1.2% for the gasoline tank, the tank was removed on December 16, 1998 under the observation of Mr. Steve Tyler with Caltrans and Mr. Mike Rees with SCDEM. The gasoline steel tank was noted to have four pinholes in the bottom. On December 16, 1998 the UST was transported by Ecology Control Industries under hazardous waste manifest Nos. 98454692 Erickson Inc., located in Richmond, California. A copy of the manifest is presented in Appendix B.

Soil samples were collected subsequent to the tank removal operations under the direction of Mr. Mike Rees and Mr. Steve Tyler at the following locations:

- One soil sample S-1 was collected at a depth of 5.25 feet below ground surface from the 50-gallon gasoline UST excavation.
- One composite soil sample (SP-1A-1D) was collected from the soil stockpile.

The approximate soil sample locations are depicted on Figure 3. The soil samples were obtained using pre-cleaned 6-inch long sample tubes. The soil samples were subsequently sealed or capped, labeled, and placed in an ice chest containing blue ice, and transported to Advanced Technologies Laboratories (ATL), a California certified laboratory, using standard chain-of-custody documentation.

The tank excavation was subsequently backfilled with permission from SCDEM and Caltrans personnel. The excavation was backfilled with imported 3/4-inch gravel. Asphalt was placed to match surrounding grade and compacted with a vibratory compactor.

The stockpiled soil was placed in eight drums and transported under non-hazardous waste manifest by Ecologix Strategic Services Co., Ltd to TPS Technologies facility located in Richmond California. A copy of the non-hazardous waste manifest is presented in Appendix B.

#### 4.0 ANALYTICAL RESULTS

The UST removal soil sample and soil stockpile samples were transported via overnight delivery to ATL under expedited 48-hour turn-around-time. In accordance with the SCDem requirements, the soil samples were analyzed for total petroleum hydrocarbons as gasoline (TPHg) using Environmental Protection Agency (EPA) Test Method 8015 modified, benzene, toluene, ethylbenzene and total xylenes (BTEX) using EPA Test Method 8020 fuel oxygenate compounds (FOCs) using EPA Test Method 8260 and total lead using EPA Test Method 6010.

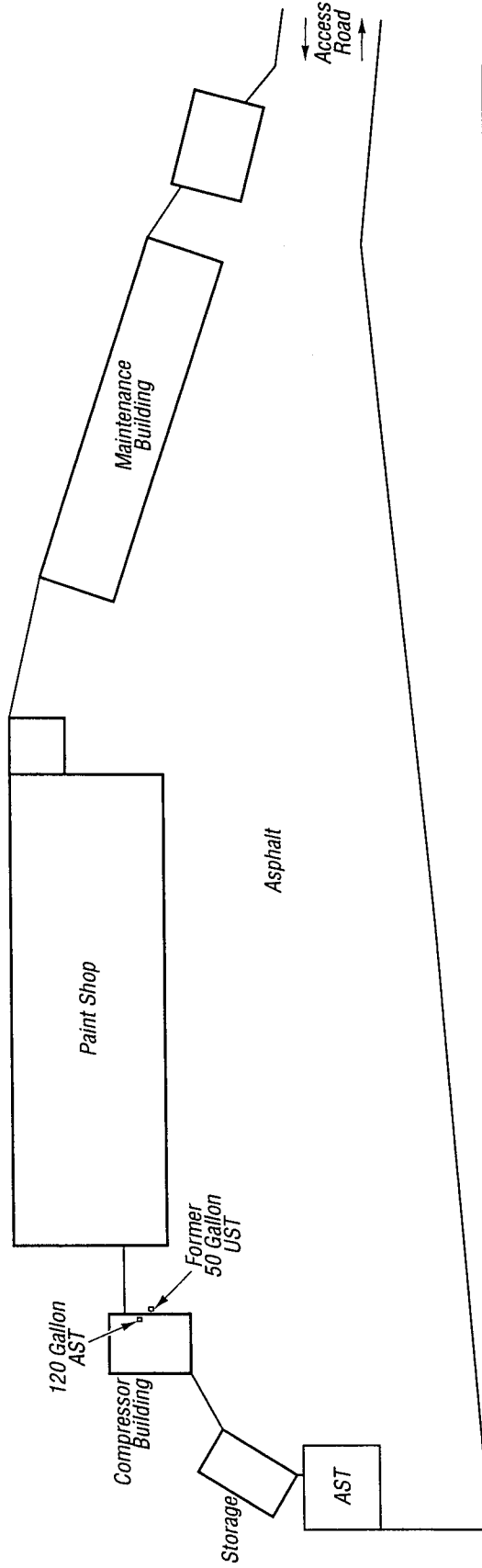
TPHg was detected in both the excavation and stockpile soil samples at concentrations of 1,270 milligrams per kilogram (mg/kg) and 57 mg/kg, respectively. BTEX was detected in excavation sample S-1 at concentrations ranging from 12,400 micrograms per milligram (ug/kg) to 189,000 ug/kg. FOCs were not detected in sample S-1 with the exception of methyl tert-butyl ether (MTBE) at a concentration of 12,400 ug/kg. BTEX and FOCs were not detected in the stockpile sample SP-1A-1D with the exception of ethylbenzene and total xylenes at concentrations of 23 and 2,810 ug/kg, respectively and tert-butanol at a concentration of 4,070 ug/kg. Total lead was detected in both the excavation and stockpile samples at concentrations ranging from 42 mg/kg to 64 mg/kg, respectively. A summary of the soil analytical results are presented in Table 1. The laboratory reports and chain-of-custody documentation is presented in Appendix C.



## 5.0 SUMMARY OF FINDINGS

The results of the laboratory tests indicate the presence of gasoline range petroleum hydrocarbon soil impacts. Additional site assessment will be required to determine the extent of the former gasoline UST related site impacts. It is requested that the SCDEM provide a written opinion regarding the status of the subject UST site.





Carquinez Bridge

INTERSTATE 80

LEGEND:

- AST Aboveground Storage Tank
- UST Underground Storage Tank



**GEOCON**

ENVIRONMENTAL CONSULTANTS INCORPORATED  
11375 SUNRISE PARK DR. - SUITE 100 - RANCHO CORDOVA, CA. 95742  
PHONE 916 852-9116 - FAX 916 852-9132



Carquinez Bridge Maintenance Station

Caltrans District 4  
Oakland, California

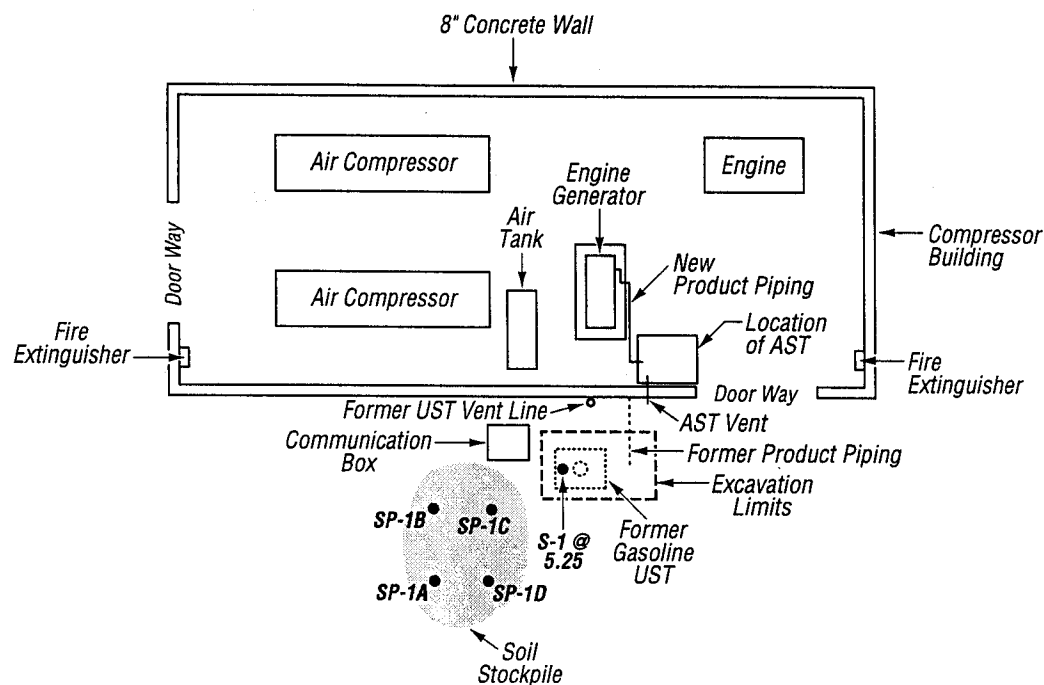
**SITE PLAN**

GEOCON Proj. No S8190-06-11

March 1999

Figure 2

Task Order No. 04-43A0006-75



0 10  
Scale in Feet

**LEGEND:**

SP-1A ● Approximate Soil Sample Location

**GEOCON**

ENVIRONMENTAL CONSULTANTS INCORPORATED  
11375 SUNRISE PARK DR. - SUITE 100 - RANCHO CORDOVA, CA. 95742  
PHONE 916 852-9118 - FAX 916 852-9132



**Carquinez Bridge Maintenance Station**

Caltrans District 4  
Oakland, California

GEOCON Proj. No S8190-06-11

Task Order No. 04-43A0006-75

**UST REMOVAL  
SOIL SAMPLE  
LOCATIONS**

March 1999

Figure 3

TABLE 1  
 SUMMARY OF UST REMOVAL SOIL ANALYTICAL DATA  
 CARQUINEZ BRIDGE MAINTENANCE STATION  
 SOLANO COUNTY, CALIFORNIA

SAMPLE ID.	SAMPLE DATE	SAMPLE DEPTH (feet)	SAMPLE LOCATION	TPHg (mg/kg)	BENZENE (µg/kg)	TOLUENE (µg/kg)	ETHYL-BENZENE (µg/kg)	TOTAL XYLENES (µg/kg)	FOCs (µg/kg)	TOTAL LEAD (mg/kg)
S-1	12/16/98	5.25	GAS UST	1,270	<500	42,800	13,000	189,000	12,400 MTBE	42
SP-1A, SP-1B, SP-1C, SP-1D	12/16/98	---	SOIL STOCKPILE	57	<5	<5	23	2,810	4,070 TBA	61

Notes: TPHg = Total petroleum hydrocarbons as gasoline  
 FOCs = Fuel oxygenate compounds by EPA Test Method 8260  
 MTBE = Methyl tert-butyl ether  
 TBA = Tert-butanol  
 mg/kg = Milligrams per kilogram  
 µg/kg = Micrograms per kilogram  
 < = Less than laboratory test method detection limits  
 --- = Data not applicable

# APPENDIX

A



Department of  
Environmental Management

601 TEXAS STREET  
FAIRFIELD, CALIFORNIA • 94533-6301

RECEIVED  
DEC 10 1998  
ENVIRONMENTAL

Environmental Health Division  
(707) 421-6765

Clifford K. Covey, REHS, CHMM  
Program Manager

December 2, 1998

Mr. Scott Waite  
GeoCon  
11375 Sunrise Park Dr., Suite 100  
Rancho Cordova, CA 95742

Re: Permit to Remove 1 x 50 Gallon Gasoline Underground Storage Tank (UST) @Carquinez  
Maintenance Station, Caltrans Carquinez Bridge on I-80, Vallejo; File #11000

Dear Mr. Waite:

Your application to remove one underground storage tank has been approved subject to the following conditions as required by Chapter 13.5 of the Solano County Code and Title 23, Div. 3, Chapter 16, Article 7, California Code of Regulations:

1. The Vallejo Fire Department shall be notified of the pending removal operation and shall oversee the implementation of the Uniform Fire Code dealing specifically with matters of safety, purging of harmful vapors contained in the tanks and removal of the tanks from the above location.
2. Verification of the integrity of the existing tank system shall take place by inspection of the removed tanks after the outer surface has been scraped clean and inspection of the tank excavation by an Environmental Health Specialist.
3. Soil samples and/or water samples shall be required on the day of tank removal. Sampling shall be conducted in accordance with the Tri- Regional requirements. Results of the laboratory analysis shall be submitted for review by this Division within 30 days after sampling. The analyses listed in enclosure #1 shall be required on the soil and/or groundwater taken from the tank excavation.
4. With the exception of soils being accepted by a permitted Treatment Storage or Disposal (TSD) facility, no soils shall leave the site until the laboratory results of the soil samples required by enclosure # 1 have been examined by personnel of this office and a suitable receptacle for the soils has been established.

5. Contaminated backfill materials shall not be returned to the excavation pit, but shall be held on site with a barrier of cement, asphalt, visqueen, or other material deemed suitable by this office. The backfill materials shall be separated from native soils. A soil remediation plan shall be submitted if on-site treatment is proposed. Proof of legal disposal of contaminated soil shall be submitted within 30 days of disposal.
6. All materials removed from the tanks shall be containerized and treated as hazardous waste according to Division 20, Chapter 6.5 of the California Health and Safety Code.
7. All tanks shall be treated as hazardous waste and shall be directly transported to a California Department of Health Services licensed TSD facility by a licensed waste hauler utilizing the Uniform Hazardous Waste Manifest. The manifest number shall be provided to this office.
8. Technical reports, documents, and plans which contain engineering, geology, and/or geophysical information must be prepared by, or under the direction of, properly licensed individuals in the State of California, pursuant to Sections 6735, 7835, and 7835.1 of the Business and Professions Code. Responsibility for the technical information is indicated by signature and/or stamp of the seal of the responsible licensed individual(s). More than one signature and/or seal may be required where more than one professional specialty is included within the technical report, document, or plan submitted.
9. A detailed site safety plan shall be available on site at all times.
10. If during the removal process, a release of contaminate is found or threatened, warning signs shall be posted at the site. Proposition 65 pursuant to Section 25249.6 of the Calif Health & Safety Code, requires that no person in the course of doing business shall knowingly and intentionally expose any individual to a chemical known to the state to cause cancer or reproductive toxicity without first giving clear and reasonable warning.
11. The contractor shall maintain an appropriate contractor's license and hazardous materials certificate from the State Contractor's License Board.
12. **Forty-eight hours notice** shall be given to this office prior to initiating work at the site. An appointed time for the removal of the tanks shall be set. If that set time cannot be met by the Contractor, cancellation of that appointment shall be made at least 4 hours before the removal.
13. You must notify the Bay Area Air Quality Management District of your removal plans.



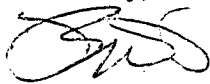
14. **If you have not complied with the conditions of this permit (i.e. removal of tanks) by December 22, 1998, you shall have complied with the following:**

- A. Empty tanks and submit copy of manifest demonstrating legal disposal of contents.
- B. Except for required venting, seal all fill and access locations and piping using locking caps or concrete plugs.
- C. Disconnect power to all pumps associated with the use of the underground storage tanks.
- D. Inspect underground storage tanks quarterly to verify locks and seals are still in place and no liquids have been added to the tanks.
- E. In accordance with LG-149, submit a written plan to assess soil and groundwater contamination on site using borings and/or monitoring wells.
- F. Request an inspector from our office verify (through a field inspection) that items A through D have been completed by December 22, 1998. You shall request this inspection at least 2 working days in advance.

**The work listed in items A through E shall be completed by December 22, 1998. If this work is not completed by this date, and the underground storage tanks have not been removed in accordance with this permit, we may forward your case to the District Attorney's Office. This permit to remove is valid for one year from the date of this letter.**

Should you have any questions, please contact this office at (707) 421-6765.

Sincerely,



Bradley S. Nicolet  
Senior Environmental Health Specialist

cc: 1. Vallejo Fire Department  
2. Bay Area Air Quality Management District, 939 Ellis Street  
San Francisco, CA. 94109 Attn: Jack Bean  
3. Vallejo Building Department

Enclosure # 1

**ANALYSES/PROCEDURES REQUIRED FOR UNDERGROUND STORAGE TANK CLOSURES**

WASTE OIL TANK

SOIL	WATER
TPH as Gas 5030/3550/8015M	5030/3550/8015M
TPH as Diesel 3550/8015M	3510/8015M
Oil and Grease 5520 or 413.1 (EPA)	5520 C&F/413.2 (EPA)
Halogenated Hydrocarbons:	
8260	8260
BTEX/MTBE & ADDITIVES 8260	8260
ICAP Metals:	
Cd, Cr, Pb, Ni, Zn 6010	6010
PCBs 8080	8080
PNAs & SEMIVOLATILES 8270	8270

FUEL, GASOLINE OR DIESEL TANK

SOIL	WATER
TPHg or TPHd 5030/8020/8015M	5030/3510/8015M
BTEX/MTBE & ADDITIVES 8260	8260
Total Lead 6010	6010

Notes:

Samples are normally taken 2 feet into native soil on the basis of:

- one sample under the tank fill end for tanks under 1,000 gallons
- two samples, one under each end of a tank up to 10,000 gallons
- three samples, one under the ends and one under the center of tanks over 10,000 gallons.

If groundwater is encountered, the same number of samples shall be taken 6 " above the soil/groundwater interface and one sample taken of the groundwater. The excavation may be purged of water prior to obtaining the water sample. (Sampling from the saturated zone is recommended as a source of additional useful data).

Excavated materials in the spoils pile shall be sampled as a 4:1 composite sample each 50 cubic yards or as a discrete sample each 20 cubic yards.

Product lines shall be sampled every 20 linear feet beginning at the entry point to the tank excavation and measured backward to the pump or fill with both ends sampled as a minimum.

Additional samples may be required if observed conditions warrant further data.



Department of  
Environmental Management

601 TEXAS STREET  
FAIRFIELD, CALIFORNIA • 94533-6301  
707-421-6765

File # \_\_\_\_\_

APPLICATION TO CLOSE AN UNDERGROUND  
STORAGE TANK FOR HAZARDOUS SUBSTANCES

REMOVE ☒ TEMPORARY CLOSURE \_\_\_\_\_ CLOSE IN PLACE \_\_\_\_\_

Applicant: GECON - SCOTT WAITE  
Address: 11375 SUNRISE PARK DR SUITE 100  
Company / Agency: CALTRANS  
Address: 111 GRAND AVE. Phone #: 570-286-4495

SITE LOCATION

Facility Name: CARQUINEE MAINTENANCE STATION  
Facility Address: CALTRANS CARQUINEE BRIDGE (ON STATE ROUTE 80)  
Property Owner: CALTRANS Phone #: 570-286-4495  
Tank(s) Owner: SAME Phone #: SAME  
Business Owner: SAME Phone #: SAME

WORKERS' COMPENSATION DECLARATION

hereby affirm that I have a certificate of consent to self-insure or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.). Certified copy is hereby furnished ☒ Certified copy is filed with Solano County  
Applicant GECON Exp. Date 9-1-99 Policy # 1478928-98 Company STATE FUND

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

CALIFORNIA INDUSTRIAL SAFETY PERMIT CLASSIFICATION

hereby certify that no excavation five(5) or more feet in depth into which a person is required to descend, will be made in connection with work authorized by this permit. (Chap. 3.2, Grp 2, Art 2, Sec 341, Title 8, CCR). Initial

As owner-builder, I will not perform or employ anyone to do work which would require a permit from the Division of Industrial Safety, unless such person has a permit to such work from the division. \_\_\_\_\_ Initial

Division of Industrial Safety Permit No. \_\_\_\_\_

I certify that I have read this application and state that the above information is true and accurate to the best of my knowledge. I agree to comply with all applicable county ordinances, State and Federal laws, and hereby authorize representatives of this county to enter upon the above-mentioned property for inspections purposes.

Applicant's Signature [Signature] Date 11/20/98

### CONTRACTOR/LICENSES

Contractor's Business Name: GEOCEN  
Contact Person: SCOTT WAITE Phone #: 916-852-9118  
Mailing Address: 11375 Sunrise Park Dr. Suite 100  
Consultant: SAME Phone #: \_\_\_\_\_  
State Contractor's License # 716050 Type: A

### TANK DATA

Number of tanks to be: Removed 1 Closed in Place \_\_\_\_\_

Temporarily Closed \_\_\_\_\_ Remaining after proposed closures \_\_\_\_\_

Note: Submit State A Form for the site and State B Form for each tank.

	Tank A	Tank B	Tank C	Tank D	Tank E
Capacity	<u>50 gal</u>				
Contents	<u>GASOLINE</u>				
Steel or FRP	<u>STEEL</u>				
Age	<u>40 years</u>				

### PLOT PLAN

Attach a plot plan which shows the following:

- Plot plan scale and north arrow
- Location of tank(s) and associated piping
- Location of sewer, electrical, water, & gas lines
- Location of buildings and property lines
- Location of water wells and groundwater monitoring wells

### SITE SAFETY PLAN

Attach a site safety plan that addresses, as a minimum, the following:

- Anticipated physical hazards, overhead, equipment etc.
- Fire/explosion prevention measures (meter required)
- Excavation entry procedures, sloping and shoring
- Protective clothing and chemical hazards
- Confined space entry
- Emergency medical procedures, evacuation

### CLOSURE-BASIC REQUIREMENTS

By what method will all residual vapors, liquids, solids, or sludge be removed?

LIQUID - Pumped, vapor - dry ice

What licensed hazardous waste hauler will transport hazardous waste and or underground tanks?

ELI ERIKSON

What laboratory, licensed by the California Department of Health Services, will perform analysis?

Advanced Technology Laboratories

Who is the sample collector? Robert Kimball or Scott Waite

What is the destination for residual hazardous wastes? NORTH VALLEY OIL

Environmental Protection Agency ID. No. under which tank will be manifested? CA 982029209

**REMOVAL**

What is the destination of the ground tank(s)? EET ERICKSON

The required number of soil samples per tank shall be:

<1,000 gallons - 1; >1,000 - 9999 gallons -2; >10,000 gallons - 3

Also required to be sampled: Groundwater - 1 (if present); Piping every 20 linear feet;

Excavated soil every 50 cubic yards (composite 4:1) or every 20 cubic yards (discrete)

**TEMPORARY CLOSURE**

Where will power be disconnected? \_\_\_\_\_

What method will be used to seal access locations? \_\_\_\_\_

Frequency of inspection to verify tank(s) empty and seals in place? \_\_\_\_\_

**CLOSURE IN PLACE**

Basis for requesting Closure in Place: \_\_\_\_\_

Will piping be removed or emptied and capped? \_\_\_\_\_

What inert solid will be used to fill the tank? \_\_\_\_\_

Is the proposed boring location at the centerline or at the tank ends? \_\_\_\_\_

Depth to groundwater? \_\_\_\_\_

What is the verified groundwater gradient? \_\_\_\_\_

What is the location of the monitoring well? \_\_\_\_\_

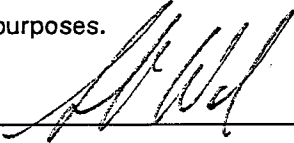
Note: Additional samples may be required subject to mitigating conditions encountered at the time of removal, or closure in place e.g. groundwater, condition of tank(s) and piping, contamination, etc. Samples taken during soil boring or monitoring well installation shall be at every 5 feet, to and including groundwater, and as lithology changes.

You must notify the Fire Department and Air Quality District having jurisdiction.

Submit findings of all soils and/or groundwater sampling and analysis done pursuant to this closure to determine extent of any contamination within 30 days of removal.

All Clean-up Proposals must be submitted in report form to the Environmental Health Services Division before any actual work is begun. The Division shall be provided with at least a 48 hour notice prior to the closure of the tank(s). Fees must be paid with the permit application.

I certify that I have read this application and state that the above information is correct. I agree to comply with all applicable county ordinances, State and Federal laws relating to underground storage tank closure, and hereby authorize representatives of this county to enter upon the above-mentioned property for inspections purposes.

Applicant's Signature  Date 11/20/98

STATE OF CALIFORNIA  
STATE WATER RESOURCES CONTROL BOARD  
**UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM A**  
COMPLETE THIS FORM FOR EACH FACILITY/SITE



MARK ONLY  
ONE ITEM

☐ 1 NEW PERMIT  
☐ 2 INTERIM PERMIT

☐ 3 RENEWAL PERMIT  
☐ 4 AMENDED PERMIT

☐ 5 CHANGE OF INFORMATION  
☐ 6 TEMPORARY SITE CLOSURE

☐ 7 PERMANENTLY CLOSED SITE

**I. FACILITY/SITE INFORMATION & ADDRESS - (MUST BE COMPLETED)**

DBA OR FACILITY NAME <i>California Petroleum Co.</i>		NAME OF OPERATOR	
ADDRESS <i>10000 California Street</i>		NEAREST CROSS STREET	PARCEL # (OPTIONAL)
CITY NAME <i>San Francisco</i>		STATE <i>CA</i>	ZIP CODE <i>94115</i>
SITE PHONE # WITH AREA CODE <i>415-398-1234</i>			
<input checked="" type="checkbox"/> BOX TO INDICATE <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LOCAL-AGENCY DISTRICTS <input type="checkbox"/> COUNTY-AGENCY* <input type="checkbox"/> STATE-AGENCY* <input type="checkbox"/> FEDERAL-AGENCY*			
<small>* If owner of UST is a public agency, complete the following: name of supervisor of division, section or office which operates the UST</small>			
TYPE OF BUSINESS <input type="checkbox"/> 1 GAS STATION <input type="checkbox"/> 2 DISTRIBUTOR <input type="checkbox"/> 3 FARM <input type="checkbox"/> 4 PROCESSOR <input checked="" type="checkbox"/> 5 OTHER		<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS	# OF TANKS AT SITE <i>1</i>
		E. P. A. I. D. # (optional)	

**EMERGENCY CONTACT PERSON (PRIMARY)**

**EMERGENCY CONTACT PERSON (SECONDARY) - optional**

DAYS: NAME (LAST, FIRST) <i>John Doe</i>	PHONE # WITH AREA CODE <i>510-236-5432</i>	DAYS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE
NIGHTS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE	NIGHTS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE

**II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)**

NAME <i>California Petroleum Co.</i>		CARE OF ADDRESS INFORMATION	
MAILING OR STREET ADDRESS <i>PO Box 33460</i>		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL-AGENCY <input checked="" type="checkbox"/> STATE-AGENCY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY	
CITY NAME <i>Oakland</i>	STATE <i>CA</i>	ZIP CODE <i>94602-0160</i>	PHONE # WITH AREA CODE <i>510-334-4477</i>

**III. TANK OWNER INFORMATION - (MUST BE COMPLETED)**

NAME OF OWNER <i>John Doe</i>		CARE OF ADDRESS INFORMATION	
MAILING OR STREET ADDRESS <i>PO Box 33460</i>		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY	
CITY NAME <i>Oakland</i>	STATE <i>CA</i>	ZIP CODE <i>94602-0160</i>	PHONE # WITH AREA CODE <i>510-334-4477</i>

**IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 322-9669 if questions arise.**

TY (TK) HQ **44-**

**V. PETROLEUM UST FINANCIAL RESPONSIBILITY - (MUST BE COMPLETED) - IDENTIFY THE METHOD(S) USED**

<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> 1 SELF-INSURED <input type="checkbox"/> 2 GUARANTEE <input type="checkbox"/> 3 INSURANCE <input type="checkbox"/> 4 SURETY BOND <input type="checkbox"/> 5 LETTER OF CREDIT <input type="checkbox"/> 6 EXEMPTION <input type="checkbox"/> 7 STATE FUND <input type="checkbox"/> 8 STATE FUND & CHIEF FINANCIAL OFFICER LETTER <input type="checkbox"/> 9 STATE FUND & CERTIFICATE OF DEPOSIT <input type="checkbox"/> 10 LOCAL GOVT. MECHANISM <input type="checkbox"/> 99 OTHER
--

**VI. LEGAL NOTIFICATION AND BILLING ADDRESS**

Legal notification and billing will be sent to the tank owner unless box I or II is checked.

CHECK ONE BOX INDICATING WHICH ABOVE ADDRESS SHOULD BE USED FOR LEGAL NOTIFICATIONS AND BILLING:

I. ☐ II. ☐ III. ☐

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

TANK OWNER'S NAME (PRINTED & SIGNATURE) <i>John Doe</i>	TANK OWNER'S TITLE <i>President</i>	DATE MONTH/DAY/YEAR <i>12/31</i>
--	--	-------------------------------------

**LOCAL AGENCY USE ONLY**

COUNTY # <input type="text"/> <input type="text"/>	JURISDICTION # <input type="text"/> <input type="text"/> <input type="text"/>	FACILITY # <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
LOCATION CODE - OPTIONAL	CENSUS TRACT # - OPTIONAL	SUPVISOR - DISTRICT CODE - OPTIONAL

THIS FORM MUST BE ACCOMPANIED BY AT LEAST (1) OR MORE PERMIT APPLICATION - FORM B, UNLESS THIS IS A CHANGE OF SITE INFORMATION ONLY.  
OWNER MUST FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

STATE OF CALIFORNIA  
STATE WATER RESOURCES CONTROL BOARD  
**UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B**



COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED ON SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input type="checkbox"/> 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED:

**I. TANK DESCRIPTION** COMPLETE ALL ITEMS - SPECIFY IF UNKNOWN

A. OWNER'S TANK I.D. #	B. MANUFACTURED BY:
C. DATE INSTALLED (MO/DAY/YEAR)	D. TANK CAPACITY IN GALLONS:

**II. TANK CONTENTS** IF A-1 IS MARKED, COMPLETE ITEM C.

A.	<input type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 4 OIL	B.	<input type="checkbox"/> 1 PRODUCT	C.	<input type="checkbox"/> 1a REGULAR UNLEADED	<input type="checkbox"/> 3 DIESEL	<input type="checkbox"/> 6 AVIATION GAS
	<input type="checkbox"/> 2 PETROLEUM	<input type="checkbox"/> 80 EMPTY		<input type="checkbox"/> 2 WASTE		<input type="checkbox"/> 1b PREMIUM UNLEADED	<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 7 METHANOL
	<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 95 UNKNOWN				<input type="checkbox"/> 1c MIDGRADE UNLEADED	<input type="checkbox"/> 5 JET FUEL	<input type="checkbox"/> 8 M85
						<input type="checkbox"/> 2 LEADED	<input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D. BELOW)	
D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED								C. A. S. #:

**III. TANK CONSTRUCTION** MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D AND E

A. TYPE OF SYSTEM	<input type="checkbox"/> 1 DOUBLE WALL	<input type="checkbox"/> 3 SINGLE WALL WITH EXTERIOR LINER	<input type="checkbox"/> 5 INTERNAL BLADDER SYSTEM	<input type="checkbox"/> 95 UNKNOWN
	<input type="checkbox"/> 2 SINGLE WALL	<input type="checkbox"/> 4 SINGLE WALL IN A VAULT	<input type="checkbox"/> 99 OTHER	
B. TANK MATERIAL (Primary Tank)	<input type="checkbox"/> 1 BARE STEEL	<input type="checkbox"/> 2 STAINLESS STEEL	<input type="checkbox"/> 3 FIBERGLASS	<input type="checkbox"/> 4 STEEL CLAD W/ FIBERGLASS REINFORCED PLASTIC
	<input type="checkbox"/> 5 CONCRETE	<input type="checkbox"/> 6 POLYVINYL CHLORIDE	<input type="checkbox"/> 7 ALUMINUM	<input type="checkbox"/> 8 100% METHANOL COMPATIBLE W/FRP
	<input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER
C. INTERIOR LINING OR COATING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LINING	<input type="checkbox"/> 3 EPOXY LINING	<input type="checkbox"/> 4 PHENOLIC LINING
	<input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input checked="" type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER
IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES ___ NO ___				
D. EXTERIOR CORROSION PROTECTION	<input type="checkbox"/> 1 POLYETHYLENE WRAP	<input type="checkbox"/> 2 COATING	<input type="checkbox"/> 3 VINYL WRAP	<input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC
	<input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 91 NONE	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER
E. SPILL AND OVERFILL, etc.	SPILL CONTAINMENT INSTALLED (YEAR) _____		OVERFILL PREVENTION EQUIPMENT INSTALLED (YEAR) _____	
	DROP TUBE YES ___ NO ___		STRIKER PLATE YES ___ NO ___	
			DISPENSER CONTAINMENT YES ___ NO ___	

**IV. PIPING INFORMATION** CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A U 1 SUCTION	A U 2 PRESSURE	A U 3 GRAVITY	A U 4 FLEXIBLE PIPING	A U 99 OTHER
B. CONSTRUCTION	A U 1 SINGLE WALL	A U 2 DOUBLE WALL	A U 3 LINED TRENCH	A U 95 UNKNOWN	A U 99 OTHER
C. MATERIAL AND CORROSION PROTECTION	A U 1 BARE STEEL	A U 2 STAINLESS STEEL	A U 3 POLYVINYL CHLORIDE (PVC)	A U 4 FIBERGLASS PIPE	
	A U 5 ALUMINUM	A U 6 CONCRETE	A U 7 STEEL W/ COATING	A U 8 100% METHANOL COMPATIBLE W/FRP	
	A U 9 GALVANIZED STEEL	A U 10 CATHODIC PROTECTION	A U 95 UNKNOWN	A U 99 OTHER	
D. LEAK DETECTION	<input type="checkbox"/> 1 MECHANICAL LINE LEAK DETECTOR	<input type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 CONTINUOUS INTERSTITIAL MONITORING	<input type="checkbox"/> 4 ELECTRONIC LINE LEAK DETECTOR	<input type="checkbox"/> 5 AUTOMATIC PUMP SHUTDOWN
				<input type="checkbox"/> 99 OTHER	

**V. TANK LEAK DETECTION**

<input type="checkbox"/> 1 VISUAL CHECK	<input type="checkbox"/> 2 MANUAL INVENTORY RECONCILIATION	<input type="checkbox"/> 3 VADOZE MONITORING	<input type="checkbox"/> 4 AUTOMATIC TANK GAUGING	<input type="checkbox"/> 5 GROUND WATER MONITORING	<input type="checkbox"/> 6 ANNUAL TANK TESTING
<input type="checkbox"/> 7 CONTINUOUS INTERSTITIAL MONITORING	<input type="checkbox"/> 8 SIR	<input type="checkbox"/> 9 WEEKLY MANUAL TANK GAUGING	<input type="checkbox"/> 10 MONTHLY TANK TESTING	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

**VI. TANK CLOSURE INFORMATION** (PERMANENT CLOSURE IN-PLACE)

1. ESTIMATED DATE LAST USED (MO/DAY/YR)	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING _____ GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input type="checkbox"/>
---	--	--

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

TANK OWNER'S NAME  
(PRINTED & SIGNATURE)

DATE

**LOCAL AGENCY USE ONLY** THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

STATE I.D. #	COUNTY #	JURISDICTION #	FACILITY #	TANK #
PERMIT NUMBER	PERMIT APPROVED BY/DATE		PERMIT EXPIRATION DATE	

THIS FORM MUST BE ACCOMPANIED BY A PERMIT APPLICATION - FORM A, UNLESS A CURRENT FORM A HAS BEEN FILED. FORM C MUST BE COMPLETED FOR INSTALLATIONS. THIS FORM SHOULD BE ACCOMPANIED BY A PLOT PLAN. FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

SOLANO COUNTY, DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  
601 TEXAS STREET, FAIRFIELD, 707-421-6770

UNDERGROUND STORAGE TANK CLOSURE INSPECTION REPORT

REMOVAL <input checked="" type="checkbox"/>	CLOSE IN PLACE <input type="checkbox"/>	TEMP. CLOSURE <input type="checkbox"/>	FILE # <input type="text"/>
---	---	--	-----------------------------

Date 12/16/98 Arrive 0830 Depart            Overtime: Y ☐ N ☐ Hours           

Facility Name ALTRANS - CAROLINE Address CAROLINE 2 BRIDGE A1. 200 WEST ST

Contractor/Sampler            No. Tanks Closed            No. Tanks Remaining           

Tank size and contents a) 50 gal b)            c)            d)           

LBS of ICE / LEL / O2 levels a) 20 / 129.1 / 29 b)            c)            d)           

Hauler/Destination SC 1 Trailer Permit #           

Manifest Number(s) 982154692

DIAGRAM (NOT TO SCALE) MANDATORY MAP ENTRIES: Location of; Tank(s) ☒ Fill Pipes ☒ Product Lines             
Dispensers            Buildings and Streets ☒ # Samples, Locations and Depths: # 1 Soil #            H2O  
#            Spoils #            Pipes

1-80



THINK TO GAL.

- TWO HOLES NOTED 20 TO A. "16
- MINOR TARD. ASSOCIATION. OVERSPILL
- NO G.W.
- SAMPLE AT CENTER 2' INTO NATIVE
- SAMPLE 4.1 SPECS.
- PIPING 1/2" COPPER AND 26W TO STAMPER
- 2 INSTEAD NORTHWESTLY REPT. HOLE

I. Removal

III. Temporary Closure

IV. Closure in Place

- | Yes                                    | No                       | Cmts                    |
|--|--------------------------|-------------------------|
| 1. <input checked="" type="checkbox"/> | <input type="checkbox"/> | Valid Closure Permit    |
| 2. <input checked="" type="checkbox"/> | <input type="checkbox"/> | Tank Cleaned            |
| 3. <input checked="" type="checkbox"/> | <input type="checkbox"/> | Destination of Rinseate |
| 4. <input checked="" type="checkbox"/> | <input type="checkbox"/> | Tank Tags U.L. #'s      |
| 5. <input checked="" type="checkbox"/> | <input type="checkbox"/> | Holes in Tank(s)/Pipes  |
| 6. <input checked="" type="checkbox"/> | <input type="checkbox"/> | Soil Type <u>CLAY?</u>  |
| 7. <input checked="" type="checkbox"/> | <input type="checkbox"/> | Soil Staining/Odor      |

- | Yes                          | No                       | Cmts                        |
|------------------------------|--------------------------|-----------------------------|
| 13. <input type="checkbox"/> | <input type="checkbox"/> | Valid Closure Permit        |
| 14. <input type="checkbox"/> | <input type="checkbox"/> | Tank Contents Removed       |
| 15. <input type="checkbox"/> | <input type="checkbox"/> | Witnessed Sticking          |
| 16. <input type="checkbox"/> | <input type="checkbox"/> | Locks or Seals on Fill Caps |
| 17. <input type="checkbox"/> | <input type="checkbox"/> | Product Piping Disconnected |
| 18. <input type="checkbox"/> | <input type="checkbox"/> | Vent Pipe Open              |
| 19. <input type="checkbox"/> | <input type="checkbox"/> | Power Disconnected          |

- | Yes                          | No                       | Cmts                  |
|------------------------------|--------------------------|-----------------------|
| 20. <input type="checkbox"/> | <input type="checkbox"/> | Valid Closure Permit  |
| 21. <input type="checkbox"/> | <input type="checkbox"/> | Tank(s) Rinsed        |
| 22. <input type="checkbox"/> | <input type="checkbox"/> | Soil Sampling         |
| 23. <input type="checkbox"/> | <input type="checkbox"/> | Proper Slurry Fill    |
| 24. <input type="checkbox"/> | <input type="checkbox"/> | Vents in Place        |
| 25. <input type="checkbox"/> | <input type="checkbox"/> | Indication of Release |
| 26. <input type="checkbox"/> | <input type="checkbox"/> | Notice in Deed        |
| 27. <input type="checkbox"/> | <input type="checkbox"/> | Piping Removed/Capped |

II. Soil/Water Sampling

- |   |                                     |                          |
|---|-------------------------------------|--------------------------|
| 8. <input checked="" type="checkbox"/>  | <input type="checkbox"/>            | Number of Samples        |
| 9. <input checked="" type="checkbox"/>  | <input type="checkbox"/>            | Location of Samples      |
| 10. <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Soil Tests Request       |
| 11. <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Samples to Certified Lab |
| 12. <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Sealed/Evidence Tape     |

INSPECTOR R. C. C.

RECEIVED BY           

DATE 12/16/98



**BAY AREA QUALITY  
MANAGEMENT DISTRICT**939 ELLIS STREET  
SAN FRANCISCO, CALIFORNIA 94109  
(415) 771-6000**REGULATION 8, RULE 40  
NOTIFICATION FORM**Check ☒ Removal or Replacement of Tanks  
☐ Excavation of Contaminated Soil**SITE INFORMATION**Site Address CARQUER BRIDGE (ALTRANS) (ON STATE ROUTE 80)  
City, State VALLEJO CA Zip 94590  
Owner Name CALTRANSSpecific location of project NORTH SIDE OF GENERATOR/COMPRESSOR BUILDING**Tank Removal**Scheduled startup date 12/7/98

Vapors removed by:

- ☐
- Water wash
- 
- ☒
- Vapor freeing (CO
- <sub>2</sub>
- )
- 
- ☐
- Ventilation

Indicate below if an A/C was obtained for tank replacement:

Yes ☐ No ☒ If yes, A/C or P/O # \_\_\_\_\_**Contaminated Soil Excavation**Scheduled Startup Date 12/7/98Stockpiles will be covered? Yes ☒ No ☐Indicate below the method used to comply with  
Regulation 8, Rule 40, Section 402.4:Check ☒ 8-40-301 ☐ 8-40-302 ☐ (permit required)

A/C or P/O # \_\_\_\_\_

A/C = Authority to Construct P/O = Permit to Operate

What other public agency have you notified (e.g., Fire District, Hazardous Materials Department, City or County)?

Agency Department Environmental Health Contact Dave EV BANKS Phone # (707) 421-6765**CONTRACTOR INFORMATION**Name GeoconContact Scott WhiteAddress 11375 Sunrise Park Dr. Suite 100Phone (916) 852-9118City, State, Zip Rancho Cordova CA 95742**CONSULTANT INFORMATION (if applicable)**

Name \_\_\_\_\_

Contact \_\_\_\_\_

Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Received Fax: \_\_\_\_\_

Date Postmarked: \_\_\_\_\_

Inspector No.: \_\_\_\_\_

Date: \_\_\_\_\_

By \_\_\_\_\_

Update: Contact Name \_\_\_\_\_

Date: \_\_\_\_\_

By \_\_\_\_\_

Update: Contact Name \_\_\_\_\_

Date: \_\_\_\_\_

By \_\_\_\_\_

See reverse for instructions

APPENDIX

B





ERICKSON Tank Processing JOB #: 975005  
TANK CERTIFICATION

Page 1 of 1

\*\*\*\*\* PART 1 - To be completed by the Customer \*\*\*\*\*

CUSTOMER: GEOCO

GENERATOR: Caltrans - District 4 State Waste Codes: 512

LOCATION: AT TRANS YARD, WEST BOUND 80

Vallejo At Carquinez Bridge EPA I.D.#: CA0452029209

EPA Waste Codes:

☒ None

☐ See Attached

TRANSPORTER: TRIDENT

MANIFEST #: 98454692

	TANK 1	TANK 2	TANK 3	TANK 4	TANK 5	TANK 6
TANK #:	<u>25178</u>	_____	_____	_____	_____	_____
CAPACITY:	<u>100</u>	_____	_____	_____	_____	_____
DIAMETER:	<u>24"</u>	_____	_____	_____	_____	_____
LENGTH:	<u>31"</u>	_____	_____	_____	_____	_____
STEEL/GLASS:	<u>Steel</u>	_____	_____	_____	_____	_____
LAST CONTAINED:	<u>U.G.</u>	_____	_____	_____	_____	_____

LG = Leaded Gas, UG = Unleaded Gas, D = Diesel, UO = Used Oil, FO = Fuel Oil  
Specify the material Last Contained if other than above.

ERICKSON, INC. TANK PROCESSING FACILITY  
LAND DISPOSAL RESTRICTION NOTIFICATION FORM

The waste represented on this manifest is not generated by a chemical manufacturing plant, coke-by-product recovery plant of petroleum refinery. As such, it is not regulated under 40 CFR Part 61, Subpart FF (NESHAPS for Benzene Operations).

☒ Pursuant to 40 CFR 268.7 I am notifying Erickson, Inc. that the material described by the above manifest is a nonwastewater, Non-RCRA hazardous waste and not currently subject to EPA Land Disposal Restrictions.

☒ Pursuant to CCR 22 66268.7-I am notifying Erickson, Inc. that the material described by the manifest is a metal containing Non-RCRA solid hazardous waste (66268.29(g)), and an organics containing Non-RCRA solid hazardous waste (66268.29 (k)). The treatment standards for these wastes have been repealed. This waste is no longer subject to land disposal restrictions.

I am an authorized agent/representative of the generator. I certify that all information submitted in this and associated documents is complete and accurate to the best of my knowledge. The tanks on the transport equipment have been numbered to correspond with the information provided above. In the event that the tanks do not correspond to the form, I will pay any and all costs incurred in rectifying the discrepancy(ies) between the tank(s) and the form. In the event that the tank(s) contain excessive solids or liquids, I agree to pay the cost of preparation, transportation and disposal/recycling of the excess material according to the schedule of charges in effect at the time of receipt of the tank(s). Further, I will not hold Erickson, Inc. responsible for any damage to tanks which occurs after the tanks are removed from the ground.

AUTHORIZED REPRESENTATIVE

SIGNATURE: \_\_\_\_\_

DATE: 12/16/98

PRINT NAME: Steven Tyler

TITLE: Area Superintendent

900

For assistance in completing this form, please contact Karen Ruffin at (510) 970-7463.

ONSITE TIME TRUCK 1 8:30 TO \_\_\_\_\_  
TRUCK 2 \_\_\_\_\_ TO \_\_\_\_\_

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address California Department of Transportation - District 4 P.O. Box 23660 Oakland, CA 94623-0660		C A D 9 8 2 0 2 9 2 0 9 7 5 0 0 5		98454692	
4. Generator's Phone (510) 286-4495 Attn: Steve Tyler		6. US EPA ID Number		C State Transporter's ID	
5. Transporter 1 Company Name		TRIDENT TRUCKLINES		D Transporter's Phone 15101783-2881	
7. Transporter 2 Company Name		8. US EPA ID Number		E State Transporter's ID	
9. Designated Facility Name and Site Address ERICKSON INC. 255 PARR BLVD RICHMOND, CA 94801		10. US EPA ID Number		F Transporter's Name	
C A D 0 0 9 4 6 6 3 9 2		G State Facility's ID		H Facility's Phone 610-235-1393	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol
a. WASTE EMPTY STORAGE TANK Non-RCRA hazardous waste solid		001 TP		010060	P
b.					
c.					
d.					
15. Special Handling Instructions and Additional Information Contract No 43A0006 Task Order No. 04-43A0006-15 Wear appropriate protective clothing when handling. SITE LOCATION: Caltrans Carquinez 24 Hour Emergency Telephone Number (916) 508-1916 Bridge Maintenance Station 24 Hour Emergency Contact: Bob Kimball - GECCON Northern Terminus of Carquinez Bridge Interstate 80, Solano County		16. HANDLING CODES FOR WASTES LISTED ABOVE		17. WASTE NUMBER	
CITY: EMPTY STORAGE TANK(S) #25171 TANK(S) HAVE BEEN LINED WITH 15 LBS DRY ICE PER 1000 GALLONS CAPACITY		18. HANDLING CODES FOR WASTES LISTED ABOVE		19. WASTE NUMBER	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		Signature Steve Tyler		Month Day Year 12/16/98	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Bob Samra		Month Day Year 12/16/98	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Month Day Year	

DO NOT WRITE BELOW THIS LINE.

# ECO>Logix

STRATEGIC SERVICES CO., LTD.  
P.O. BOX 7856 CHICO, CA. 95927  
530.342.3020  
530.342.6449 FAX  
707.746.3113 PAGER

## Invoice/Manifest

NON-HAZARDOUS MATERIALS ONLY

# 99-1089

### BILLING/CONSULTANT INFORMATION

BILL TO: GEOMON ENV. CONS. CONTACT: SCOTT WATTE  
ADDRESS: 11375 SUNRISE PARK DR. #100 PHONE #: 916-852-9118  
CITY/STATE: RANCHO CORDOVA, CA. FAX #: 916-852-9132  
95742

SITE NAME: CALTRANS SITE & GENERATOR INFORMATION  
GENERATOR: CALTRANS  
ADDRESS: CARQUINEZ BRIDGE ADDRESS: /  
CITY/STATE: VALLEJO, CA. CITY/STATE: /

GENERATOR/CONSULTANT/AGENT CERTIFIES THIS WASTE IS 100% NON-HAZARDOUS

BY: TBS SIGNATURE GENERATOR/CONSULTANT/AGENT (CIRCLE ONE) DATE: 3-1-99

### TRANSPORTER & FACILITY INFORMATION

COMPANY NAME: ECOLOGIX STRATEGIC SERVICES CO., LTD PHONE #: 707.748.4485 OR 530.342.3020  
MAILING ADDRESS: P.O. BOX 7856 CHICO, CA. 95927 FAX #: 707.748.4486 OR 530.342.6449  
OTHER: \_\_\_\_\_ TRUCK I.D.# \_\_\_\_\_ PHONE: \_\_\_\_\_

ECOLOGIX DOES NOT ASSUME TITLE TO WASTE SHIPMENTS

DRIVER \_\_\_\_\_ DATE: \_\_\_\_\_ # OF DRUMS, ETC. 8 LOAD# 1 OF 1  
RECEIVED BY: JMB Storto DATE: 3-2-99 SOIL 8 WATER \_\_\_\_\_ OTHER \_\_\_\_\_

FOR SHIPMENT TO: \_\_\_\_\_ MCKITTRICK WASTE TREATMENT ☒ TPS TECHNOLOGIES  
56533 HIGHWAY 58 20 RECYCLING LANE  
MCKITTRICK, CA. 93251 RICHMOND, CA. 94801  
805.762.7366 510.235.8778

OTHER: \_\_\_\_\_

GASOLINE UST SOURCE PROFILE # \_\_\_\_\_

DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL
<u>TPHG SOIL</u>	<u>8 DRUMS</u>	<u>\$ 95.-</u>	<u>\$ 760.-</u>
<u>STLC-LEAD</u>	<u>1</u>	<u>\$ 50.-</u>	<u>\$ 50.-</u>
		TOTAL THIS INVOICE:	<u>\$ 810.00</u>

PAYMENT TERMS ARE NET 30 DAYS. PAYMENT LIABILITY IS INCURRED AT TIME OF LOADING. PLEASE REMIT TO ADDRESS ABOVE UNLESS OTHERWISE INDICATED HERE. ☒ GATEWAY P.O. BOX 829 ALAMO, CA. 94507

IMPORTANT-PAY ONLY TO  
GATEWAY ACCEPTANCE CO.  
BOX 829, ALAMO, CA 94507

This account and the related goods and or services have been assigned to and are payable only to Gateway Acceptance Co. All payments and or the return or rejection of any goods and or services must be made directly to Gateway Acceptance Co. (925) 820-6833

FOR PROPER CREDIT - PLEASE list supplier name and invoices being paid with remittance.

sw  
58190-06-11  
3/2/99



APPENDIX

C

January 13, 1999

ELAP No.: 1838

Geocon Environmental  
11375 Sunrise Park Drive, Suite 100  
Rancho Cordova, CA 95742

ATTN: Mr. Scott Waite


Client's Project: Carquinez Bridge Maint. Station, S8190-06-11  
Lab No.: 31637-001/006

Gentlemen:

Enclosed are the results for sample(s) received by Advanced Technology Laboratories and tested for the parameters indicated in the enclosed chain of custody.

Thank you for the opportunity to service the needs of your company. Please feel free to call me at (562) 989 - 4045 if I can be of further assistance to your company.

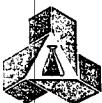
Sincerely,

  
Cheryl De Los Reyes  
Technical Operations Manager  
CDR/ra

Enclosures

This cover letter is an integral part of this analytical report.

This report pertains only to the samples investigated and does not necessarily apply to other apparently identical or similar materials. This report is submitted for the exclusive use of the client to whom it is addressed. Any reproduction of this report or use of this Laboratory's name for advertising or publicity purpose without authorization is prohibited.



*Advanced Technology*  
*Laboratories*

1510 E. 33rd Street Signal Hill, CA 90807 Tel: 562 989-4045 Fax: 562 989-4040



**Client:** Geocon Environmental Consultants  
**Attn:** Mr. Scott Waite

**Client's Project:** Carquinez Bridge Maint Station, S8190-06-11

**Date Received:** 12/17/98

**Date Sampled:** 12/16/98

**Date Digested:** 12/21/98

**Digestion Method:** EPA 3050

[illegible]

**MDL = Method Detection Limit**

**ND = Not Detected (Below DLR)**

**DF = Dilution Factor (DLR/MDL)**

Reviewed/Approved By:

**Cheryl de los Reyes**  
**Technical Operations Manager**

Date:

The cover letter is an integral part of this analytical report.

Method:	EPA 6010 (Lead)
Analyst:	LP/OL
Data File:	ICP81221-1
QA File:	8355-1

Date Analyzed:	12/21/98
Date Digested:	12/21/98
Sample ID:	See below
Matrix:	Soil

**Matrix:** Soil  
**QAQC Batch No:** ICP981221-1

[illegible]

Approved by:

**David J. Kern**  
**Inorganics Supervisor**

Date:

21/9/67

Client: Geocon Environmental Consultants  
Attn: Mr. Scott Waite

Client's Project: Carquinez Bridge Maint. Station, S8190-06-11  
Date Received: 12/17/98  
Matrix: Soil  
Units: µg/kg


EPA Method 8260 (Oxygenated Compounds)

Lab No.:	Method Blank	31637-001*	31637-006*	LCS							
Client Sample I.D.:	----	S-1	Composite	----							
Date Sampled:	---	12/16/98	12/16/98	---							
QC Batch #:	Q98VOCS269	Q98VOCS269	Q98VOCS269	Q98VOCS269							
Date Analyzed:	12/21/98	12/21/98	12/21/98	12/21/98							
Analyst Initials:	EM	EM	EM	EM							
Dilution Factor:	1	100	5	1							
ANALYTE	MDL	DLR	Results	DLR	Results	DLR	Results	Limits	Results		
Ethanol	2000	2000	ND	200000	ND	10000	ND	21-175	NS		
Tert-Butanol	100	100	ND	10000	ND	500	4070	21-175	NS		
Methyl tert-Butyl Ether	5	5	ND	500	12400	25	ND	21-175	84		
Di-isopropyl Ether	5	5	ND	500	ND	25	ND	21-175	NS		
Ethyl tert-Butyl Ether	5	5	ND	500	ND	25	ND	21-175	NS		
Tert-Amyl methyl Ether	5	5	ND	500	ND	25	ND	21-175	NS		

MDL = Method Detection Limit  
ND = Not Detected (Below DLR).  
DLR = MDL X Dilution Factor  
NA = Not Analyzed  
NS = Not Spiked

\* = Dilution required due to presence of non target hydrocarbons in the sample.

Reviewed/Approved By: \_\_\_\_\_

  
Lee Ingvaldson  
Department Supervisor

Date

1/13/99

The cover letter is an integral part of this analytical report.

Method : C:\HPCHEM\1\METHODS\PVS1111.M (RTE Integrator)  
Title : VOC 8240/8260B Advanced Technology Laboratory  
Last Update : Thu Dec 24 07:08:47 1998  
Response via : Initial Calibration


Non-Spiked Sample: 31630-04.D

Spike Sample	Spike Duplicate Sample
File ID : PL1221A.D	PMD1221A.D
Sample : MS 31630-04	MSD 31630-04
Acq Time: 21 Dec 98 11:43 am	22 Dec 98 8:35 am

Compound	Sample Conc	Spike Added	Spike Res	Dup Res	Spike %Rec	Dup %Rec	RPD	QC Limits RPD	Limits % Rec
1,1-dichloroethene	0.0	100	95	92	95	92	3	20	58-156
benzene	0.0	100	103	106	103	106	3	12	72-134
trichloroethene	0.0	100	109	107	109	107	2	16	55-145
toluene	1.1	100	98	111	97	110	12	16	73-127
chlorobenzene	0.0	100	103	107	103	107	4	11	80-119

QCBATCH#P98VOCS269

Reviewed/Approved By: \_\_\_\_\_

  
Lee Ingvaldson  
Department Supervisor

Date: 01/25/99



Advanced Technology  
Laboratories

1510 E. 33rd Street Signal Hill, CA 90807 Tel: 562 989-4045 Fax: 562 989-4040

Client: Gecon Environmental Consultants  
Attn: Mr. Scott Waite

Client's Project: Carquinez Bridge Maint. Station, S8190-06-11  
Date Received: 12/17/98  
Date Amended: 12/23/98  
Matrix: Soil  
Date Amended: 01/13/99

**METHOD 8015M (Gasoline)/EPA 8020**

Lab No.:	Method Blank	31637-001	31637-006	LCS					
Client Sample I.D.:	---	S-1	Composite	---					
Date Sampled:	---	12/16/98	12/16/98	---					
QC Batch #:	1988G20S448	1988G20S448	1988G20S448	1988G20S448					
Date Analyzed:	12/21/98	12/21/98	12/21/98	12/21/98					
Analyst Initials:	RL	RL	RL	RL					
Dilution Factor:	1	100	1	1					
Analyte	MDL	Units	DLR	Results	DLR	Results	Units	%Rec	
TPH (Gas)	1	mg/kg	1.0	ND	100	1270	5.0	57*	38-146
Benzene	5	ug/kg	5.0	ND	500	ND	5.0	ND	41-145
Toluene	5	ug/kg	5.0	ND	500	42800	5.0	ND	41-145
Ethylbenzene	5	ug/kg	5.0	ND	500	13000	5.0	23	41-145
Xylenes (total)	5	ug/kg	5.0	ND	500	189000	5.0	2810	41-145

\* Dilution factor of 5

Lab No.:									
Client Sample I.D.:									
Date Sampled:									
QC Batch #:									
Date Analyzed:									
Analyst Initials:									
Dilution Factor:									
Analyte	MDL	Units	DLR	Results	DLR	Results	Units	%Rec	
TPH (Gas)	1	mg/kg							
Benzene	5	ug/kg							
Toluene	5	ug/kg							
Ethylbenzene	5	ug/kg							
Xylenes (total)	5	ug/kg							

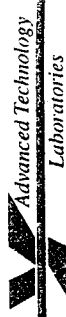
MDL = Method Detection Limit  
ND = Not Detected. (Below DLR)

DLR = MDL X Dilution Factor  
NA = Not Analyzed

*[Signature]*

Reviewed/Approved By: \_\_\_\_\_  
Lee Ingvaldson, Department Supervisor

Date: 1/13/99



Method : C:\HPCHEM\1\METHODS\CARBON.M (RTE Integrator)  
Title : 8015GAS/ 8020(BTXE)  
Last Update : Mon Oct 05 12:01:21 1998  
Response via : Initial Calibration


Non-Spiked Sample: IB1221A.D

Spike Sample	Spike Duplicate Sample
File ID : IMS1221A.D	IMD1221A.D
Sample : BLANK-3ppm MS Gas (+BTEX)	BLANK-3ppm MSD Gas (+BTEX)
Acq Time: 22 Dec 1998 6:31 am	22 Dec 1998 6:56 am

Compound	Sample Conc	Spike Added	Spike Res	Dup Res	Spike %Rec	Dup %Rec	RPD	QC Limits RPD	QC Limits % Rec
Gasoline (mg/kg)	ND	3	3	3	94	95	0	21	41-151
Benzene #2 (ug/kg)	ND	31	21	23	68	72	6	15	42-132
Toluene #2 (ug/kg)	ND	183	163	170	88	92	4	15	42-132

QC BATCH #:I988G20S448

Reviewed and Approved by: \_\_\_\_\_

  
Lee Ingvaldson  
Organics Supervisor

Date: 01/25/99



Advanced Technology  
Laboratories

1510 E. 33rd Street Signal Hill, CA 90807 Tel: 562 989-4045 Fax: 562 989-4040

# CHAIN OF CUSTODY RECORD

Pg 1 of 1

FOR LABORATORY USE ONLY:

**Advanced Technology Laboratories**  
1510 E. 33rd Street  
Signal Hill, CA 90807  
(562) 989-4045 • FAX (562) 989-4040

Batch #: \_\_\_\_\_ D.O. # \_\_\_\_\_  
P.O. # \_\_\_\_\_ Date: 12-17-98 Time: 0815  
Logged By: [Signature]

Method of Transport  
☐ Walk-in ☒ Courier  
☐ UPS ☐ FED. EXP. ☐ ATL

Sample Condition Upon Receipt  
1. CHILLED ☐ 2. SEALED ☐ 3. N ☐ 4. N ☐  
2. HEADSPACE (NOA) ☐ 3. N ☐ 4. N ☐ 5. # OF SPLS MATCH COC ☒ 6. N ☐  
3. CONTAINER INTACT ☒ 4. N ☐ 5. PRESERVED ☐ 6. N ☐

Client: GEOCON ENVIRONMENTAL - SACRAMENTO

Address: 11375 Sunrise Park Drive, Suite 100

TEL: ( 916 ) 852-9118

Attn: [Signature] City: Rancho Cordova State: CA Zip Code: 95742 FAX: ( 916 ) 852-9132

Project Name: BRIDGEWAY/STALAM Project #: 880000-11 Sampler: Rebecca L. Silva (Printed Name) (Signature)  
Relinquished by: (Signature and Printed Name) [Signature] Date: 12-17-98 Time: 1400 Received by: (Signature and Printed Name) [Signature] Date: 12-17-98 Time: 1400  
Relinquished by: (Signature and Printed Name) [Signature] Date: 12-17-98 Time: 1400 Received by: (Signature and Printed Name) [Signature] Date: 12-17-98 Time: 1400

SHIP TO LAB: (SUB CONTRACT) \_\_\_\_\_  
TEST: \_\_\_\_\_  
ATL #: \_\_\_\_\_  
DATE: \_\_\_\_\_  
CLIENT I.D.: \_\_\_\_\_

Send Report To:  
Attn: \_\_\_\_\_  
Co: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Special Instructions/Comments:  
Call call 4350000  
Composite sample SP-14, SP-15, SP-16, SP-17

Unless otherwise requested, all samples will be disposed 45 days after receipt.

Sample Archive/Disposal:  
☐ Laboratory Standard  
☐ Other  
☐ Return To: \_\_\_\_\_  
\* \$10.00 FEE PER HAZARDOUS SAMPLE DISPOSAL.

LAB USE ONLY: Batch #:	Sample Description			
	Batch #:	Sample I.D.	Date	Time
010000-001	SP-1	12/17/98	0820	SP-1
002	SP-1A	12/17/98	0820	SP-1A
003	SP-1B	12/17/98	0820	SP-1B
004	SP-1C	12/17/98	0820	SP-1C
005	SP-1D	12/17/98	0820	SP-1D

City _____ State _____ Zip _____		QA/QC																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
Circle or Add Analysts(es) Requested	CIRCLE APPROPRIATE MATRIX	PRESERVATION						REMARKS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
		Container(s)	#	Type	TAT	OTHER	WIRE • FILTER	AIR	DRINKING WATER	WATER • WASTE WATER	OIL • SOLVENT • LIQUID	SOLID • SOIL • SLUDGE																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
6018010 (Halogenated Volatiles-GC)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															</

Container Types: T=Tube V=VOA L=Liter P=Pint J=Jar B=Bedlar G=Glass P=Plastic M=Metal

TAT: A= Overnight ≤ 24 hr B= Next workday C= Critical 2 Workdays D= Urgent 3 Workdays E= Routine 7 Workdays

Preservatives: H=HCl N=HNO<sub>3</sub> S=H<sub>2</sub>SO<sub>4</sub> C=4°C Z=Zn(AC)<sub>2</sub> O=NaOH T=Na<sub>2</sub>SO<sub>3</sub>

• TAT starts 8 a.m. following day if samples received after 5 p.m.